

## FEC FORM 3L

REPORT OF CONTRIBUTIONS BUNDLED BY  
LOBBYISTS/REGISTRANTS AND LOBBYIST/REGISTRANT PAC'S

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SECRETARY OF THE SENATE

16 JUN - 2 PM '08 53

1. NAME OF COMMITTEE (in full) Catherine Cortez-Masto for Senate  
USE FEC MAILING OR TYPE OR PRINT  
Example: if typing, type over the lines. 12FE4M5

ADDRESS (number and street) 8020 South Rainbow Blvd

Suite 100-112

☐ Check if different  
than previously  
reported (ACC)

Las Vegas

NV

89139

CITY

STATE

ZIP CODE

## 2. FEC IDENTIFICATION NUMBER

C00575548

3. IS THIS REPORT ☒ NEW (N) OR ☐ AMENDED (A)

## 4. STATE DISTRICT

NV

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For Candidates Only

## 5. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15

Quarterly Report (Q1)

☐ July 15Quarterly Report (Q2)  
and/or Semi-annual Report☐ October 15

Quarterly Report (Q3)

☐ January 31Year End Report (YE)  
and/or Semi-annual Report☐ July 31 Mid-Year Report(Non-election Year -  
Party/PAC) (MY) and/or  
Semi-annual Report

(b) Monthly Report Due On: ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11) (Non-Election Year only)  
☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12) (Non-Election Year only)  
☐ Apr 20 (M4) ☐ Jul 20 (M7) and/or Semi-annual Report ☐ Oct 20 (M10) ☐ Jan 31 (YE) and/or Semi-annual Report

(c) 12-Day PRE-Election Report for the: ☒ Primary (12P) ☐ General (12G) ☐ Runoff (12R)  
☐ Special (12S) ☐ Convention (12C)

Election on 06 14 2016 in the State of NV

This report also covers  
the semi-annual period☐  
See Line 6(b)

(d) 30-Day POST-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on in the State of

This report also covers  
the semi-annual period☐  
See Line 6(b)

## 6. Covered Period(s)

(a) Quarterly/Monthly/Pre-/Post-Election Covered Period

(b) Semi-Annual Covered Period

This report covers 04 01 2016 through 05 25 2016

and/or ☐ January 1 - June 30☐ July 1 - December 317. Total Reportable Bundled Contributions by  
Lobbyists/Registrants or Lobbyist/Registrant PACs

(a) Quarterly/Monthly/Pre-/Post-Election Covered Period

(b) Semi-Annual Covered Period

31245.78

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Steve Mele

Signature of Treasurer

06 02 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only							
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